

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

APPROVED AND FILED

95 MAY -1 AM 10:15

SECRETARY OF STATE TALLAHASSEE, FLORIDA

CORPORATION ANNUAL REPORT 1995



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham, Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # K21601 (5)

1. Corporation Name CHARLES V. BARRETT, P.A.

Principal Place of Business: % CHARLES VINCENT BARRETT, III 701 N. FRANKLIN, SUITE. 300 TAMPA FL 33602 US
Mailing Address: % CHARLES VINCENT BARRETT, III 701 N. FRANKLIN, SUITE. 300 TAMPA FL 33617 US

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 05/01/1988
3a. Date of Last Report: 01/31/1994

2. Principal Place of Business (21-24) and 2a. Mailing Address (26-30) fields with sub-sections for Suite, Apt. #, etc., City & State, Zip, and Country.

4. FEI Number: 59-2884484
5. Certificate of Status Desired: \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees
6. This corporation has liability for intangibles tax under S. 199.032, Florida Statutes: Yes

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BARRETT, CHARLES VINCENT, III
627 BANNOCKBURN
TEMPLE TERRACE FL 33617

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the regulations of, Section 607.0505, Florida Statutes.

SIGNATURE: [Signature] DATE: 4/28/95

Table 12: OFFICERS AND DIRECTORS. Columns for TITLE, NAME, STREET ADDRESS, CITY - ST - ZIP. Entry for PD BARRETT, CHARLES VINCENT, 627 BANNOCKBURN, TEMPLE TERRACE FL.

Table 13: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. Columns for TITLE, NAME, STREET ADDRESS, CITY - ST - ZIP. Includes checkboxes for Change and Addition.

REMITTED BY MAY 1

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or as an attachment with an address.

SIGNATURE: [Signature] CHARLES VINCENT BARRETT 5/11/95 (813) 224-0225